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## WATER WELL REPORT

STATE OF WASHINGTON

Water Right DEPT OF ECOLOGY

MAR - 2 1994

Standard No. 16650

UNIQUE WELL I.D. # A80919

32/3E/27E

(1) OWNER: Name RALPH FERGUSON Address XXXX RANCH RD.(2) LOCATION OF WELL: County ISLAND SW 1/4 NW 1/4 Sec 27 T. 32 N. R. 3 W.M.

(2a) STREET ADDRESS OF WELL (or nearest address) \_\_\_\_\_

(3) PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐  
☐ Irrigation ☐ Test Well ☐ Other ☐  
☐ DeWater(4) TYPE OF WORK: Owner's number of well (if more than one) \_\_\_\_\_  
Abandoned ☐ New well ☒ Method Dug ☐ Bored ☐  
Deepened ☐ Cable ☐ Driven ☐  
Reconditioned ☐ Rotary ☒ Jetted ☐(5) DIMENSIONS: Diameter of well 6 inches.  
Drilled 182 feet Depth of completed well 180 ft

## (6) CONSTRUCTION DETAILS:

Casing installed: 6 ft. Diameter from 12 ft to 172 ft.  
Welded ☐ Diameter from \_\_\_\_\_ ft to \_\_\_\_\_ ft.  
Liner installed ☐ Diameter from \_\_\_\_\_ ft to \_\_\_\_\_ ft.  
Threaded ☐ Diameter from \_\_\_\_\_ ft to \_\_\_\_\_ ft.Perforations: Yes ☐ No ☒  
Type of perforator used \_\_\_\_\_  
Size of perforations \_\_\_\_\_ in by \_\_\_\_\_ in  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft to \_\_\_\_\_ ft  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft to \_\_\_\_\_ ft  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft to \_\_\_\_\_ ftScreens: Yes ☒ No ☐  
Manufacturer's Name SMITH  
Type SS Model No \_\_\_\_\_  
Diam. 578 Slot size 25 from 172 ft to 177 ft  
Diam. 578 Slot size 18 from 177 ft to 182 ftGravel packed: Yes ☐ No ☒ Size of gravel \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft to \_\_\_\_\_ ftSurface seal: Yes ☒ No ☐ To what depth? 18 ft.  
Material used in seal BENTONITE  
Did any strata contain unusable water? Yes ☐ No ☒  
Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_(7) PUMP: Manufacturer's Name N/A  
Type: \_\_\_\_\_ H.P.(8) WATER LEVELS: Land-surface elevation above mean sea level \_\_\_\_\_ ft  
Static level 120 ft below top of well Date 2-11-94  
Artesian pressure \_\_\_\_\_ lbs per square inch Date \_\_\_\_\_  
Artesian water is controlled by \_\_\_\_\_ (Cap, valve, etc.)(9) WELL TESTS: Drawdown is amount water level is lowered below static level  
Was a pump test made? Yes ☐ No ☐ If yes, by whom? \_\_\_\_\_  
Yield: \_\_\_\_\_ gal/min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

" " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)  
Time Water Level Time Water Level Time Water Level

" " " "

" " " "

Date of test \_\_\_\_\_

Bailer test \_\_\_\_\_ gal/min. with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs.

Airtest 100+ gal/min with stem set at 180 ft for 2 hrsArtesian flow \_\_\_\_\_ g p m Date \_\_\_\_\_  
Temperature of water \_\_\_\_\_ Was a chemical analysis made? Yes ☒ No ☐

## (10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information

MATERIAL	FROM	TO
DIET SAND & GRAVEL	0	5
HARD PAN	5	48
GRAY CLAY	48	58
GRAY CLAY w/ SAND	58	64
SAND & SMALL GRAVEL	64	85
SAND	85	94
SAND & GRAVEL	94	165
SAND GRAVEL w/ WATER	165	182

Work Started 2-10-94, 19 \_\_\_\_\_ Completed 2-11, 19 94

## WELL CONSTRUCTOR CERTIFICATION:

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME CANADIAN WELL DRILLING  
(PERSON, FIRM OR CORPORATION) (TYPE OR PRINT)Address PO BOX 432 STANWOOD WA(Signed) [Signature] License No 0611  
(WELL DRILLER)Contractor's Registration No. CANADIAN 14612 Date 2-14, 19 94

(USE ADDITIONAL SHEETS IF NECESSARY)

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## WATER WELL REPORT

STATE OF WASHINGTON

Station No. 116650  
UNIQUE WELL I.D. # A80919  
DEPT OF ECOLOGY 32/3E/27E

(1) OWNER: Name RALPH FERGUSEN Address XXXX RANCH RD

(2) LOCATION OF WELL: County ISLAND SW 1/4 NW 1/4 Sec 27 T. 32 N. R. 3 W.M.

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☐ Irrigation ☐ Test Well ☐ Other ☐  
☐ DeWater ☐ Rotary ☐ Jetted ☐

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Deepened ☐ Cable ☐ Driven ☐  
Reconditioned ☐ Rotary ☒ Jetted ☐

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Drilled 182 feet Depth of completed well 180 ft

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Liner installed ☐ Diam. from \_\_\_\_\_ ft to \_\_\_\_\_ ft.  
Threaded ☐ Diam. from \_\_\_\_\_ ft to \_\_\_\_\_ ft.

Perforations: Yes ☐ No ☒  
Type of perforator used \_\_\_\_\_  
Size of perforations \_\_\_\_\_ in by \_\_\_\_\_ in  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft to \_\_\_\_\_ ft  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft to \_\_\_\_\_ ft  
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Screens: Yes ☒ No ☐  
Manufacturer's Name SMITH  
Type SS Model No \_\_\_\_\_  
Diam. 5 7/8 Slot size 25 from 172 ft to 177 ft.  
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Gravel packed: Yes ☐ No ☒ Size of gravel \_\_\_\_\_  
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Method of sealing strata off \_\_\_\_\_

(7) PUMP: Manufacturer's Name N/A  
Type: \_\_\_\_\_ H P \_\_\_\_\_

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" " " " " "  
" " " " " "

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Time	Water Level	Time	Water Level	Time	Water Level

Date of test \_\_\_\_\_

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SAND & GRAVEL	94	165
SAND GRAVEL w/ WATER	165	182

Melisa,  
I talked to Ralph Fergusen today. He said this log should be under Juniper Beach Water District. Can we put in a change form for it?  
Arlene

Work Started 2-10-94 19 \_\_\_\_\_ Completed 2-11 1994

## WELL CONSTRUCTOR CERTIFICATION:

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NAME CANLAND WELL DRILLING  
(PERSON, FIRM OR CORPORATION) (TYPE OR PRINT)

Address PO BOX 432 STANWOOD WA

(Signed) Joseph M. M... License No. 0611  
(WELL DRILLER)

Contractor's Registration No. CANLAND 14612 Date 2-14 1994

(USE ADDITIONAL SHEETS IF NECESSARY)



## WELL LOG CHANGE FORM

**Instructions:** Record any change made to the well log record on this form.  
Then always append this form to the well log image. File with the original.

WCL Log ID (Required) 132813 Well Log ID \_\_\_\_\_

Regional Office: ☐ CRO ☐ ERO ☒ NWRO ☐ SWRO

Type of Well: ☒ Water ☐ Resource

Notice of Intent: \_\_\_\_\_ Ecology Well ID Tag No. ABD919

Property (Well) Owner's Name \_\_\_\_\_

Well Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

Location: \_\_\_\_\_ 1/4-1/4 \_\_\_\_\_ 1/4 Sec \_\_\_\_\_ Twn \_\_\_\_\_ R \_\_\_\_\_ E or W (Circle One)

Lat./Long: (Required) Lat. Deg. \_\_\_\_\_ Lat. Min/Sec \_\_\_\_\_

Long. Deg. \_\_\_\_\_ Long. Min/Sec \_\_\_\_\_

Horizontal Collection Method Code \_\_\_\_\_

Tax Parcel No \_\_\_\_\_

Type of Work: ☐ New Well ☐ Reconditioned ☐ Deepened

Well Log Received Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Well Diameter \_\_\_\_ (in inches) Well Depth \_\_\_\_ (in feet) Well Completed Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Driller's Ecology License No. \_\_\_\_\_

Trainee's Ecology License No. \_\_\_\_\_

Reason/Source of Change (Required)

Ralph Ferguson requested the owner  
name be changed to Juniper Beach  
Water District.

Signature of Well Log Tracker (Required) Melisa Snodgrass Date 6/3/03